-		. S	ubstitute for f	DETERMINA om PTO-875	ATION RECORD	unless il displays : Application	valid OMB control of Dockel Number
. :	CLAIM	IS AS FI	LED - PAR			10	810,664
FOR		(Column 1) NUMBER FILED		(Column 2)	SMALL ENTITY	OR .	OTHER THAI
8ASIC FEE (37, CFR 1.16(a))		HOWIGH FICED		NUMBER EXTRA	. RATE FEE		SMALL ENTIT
TOTAL CLAIMS (37 CFR 1.16(c))				·		7 -	RATE FE
(37 CFR 1.16(b))	CLAULT	minus 20 =		<u>.</u>	x s 25 =	OR -	5
		minus 3 =			x s 100=	I F	<u>50.</u> 20.
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))					+5180	→	
II the difference in column 1 is less than zero, enter "0" in column 2.					TOTAL	OR +	360
	CLAIMS AS	AMEND	ED – PART	u		OR T	OTAL
121	(Column 1		(Colum	in 2) (Column 3			
× 5 19 06	REMAININ	G	HIGHE	sr	SMALL ENTITY	OR .	OTHER THAN SMALL ENTITY
Total	AMENOME		PREVIOU PAID FO	SLY EXTRA	RATE ADDI-	1 1	ATE ADD
(31 CFR 1.16(c))	1.2	Minu	20	. =	x s 25 = FEE	1	TIONIL
ξ	12	Minu	1 3-	- 1	x s 100	OR Xs	
FIRST PRESE	NTATION OF WULT	IPLE DEPE	DENT CLAIM (37 CFR 1.16(d)) .	+ \$ 180=	OR x s 2	
					TOTAL ADD'L FEE	OR $+s36$	<u> </u>
	(Column 1) . CLAIMS		(Column			OR ADD'L	FEE
Total Dropp Lingui Independent Dropp 1.16011	REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS	PRESENT Y EXTRA	RATE . ADDI-		
tos cess crescel		Minus	PAID FOR	=	TIONAL FEE	RAT	TIONAL
(37 CFR 1.16(b))		Minus	 	=	x s 25 =	OR x 5)_ FEE
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					× s 100=	OR x s 200	2
•					+ s 180=	OR +360	<u>D</u>
	(Column 1)		(Column 2)	(Column 3)	ADO'L FEE	OR ADD'L FE	€.
	CLAIMS . REMAINING		HIGHEST	PRESENT			
Total	AFTER AMENOMENT		PREVIOUSLY PAID FOR	EXTRA	RATE ADDI- TIONAL	RATE	ADDI-
(37 CFR 1.16(c)) Indépendent	•	Minus		=	x s 25 FEE		TIONAL FEE .
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					x s 1002	OR $\times 50$ OR $\times 500$,
- THESENTA	HON OF MULTIPLE	DEPENDE	NT CLAIM (37 C	FR 1.16(d))	1+s180=	21.0	<u> </u>
If the entry in col	umn 1 is less tha	I (he entar	la coture : s	ile "0" in column 3.	ADD'S CCC	TOTAL	-
""" CHORESI NO	mber Previously mber Previously aber Previously P		יי ייווט טראטפ	IS less than an an	<u> </u>	OR ADD'L FEE	<u> </u>

If the Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".

The Highest Number Previously Paid For [Total or Independent] is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete application form to the USPTO. Time will vary depending upon the individual case. Any comments and Trademark Office. U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.